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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/715,891
Filing Date	November 17, 2000
First Named Inventor	Webb
Group Art Unit	1644
Examiner Name	Unassigned
Total Number of Pages in This Submission	Attorney Docket Number
	TSRI 536.1 Div 2

### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Emily Holmes
Signature	
Date	April 5, 2001

### CERTIFICATE OF MAILING

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Practitioner's Docket No. TSRI 536.1 Div 2

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In re application of: Webb, et al.

Application No.: 09 / 715,891 Group N.: 1644  
Filed: November 17, 2000 Examiner: Unassigned  
For: MHC CLASS II ANTIGEN PRESENTING SYSTEMS AND METHODS FOR ACTIVATING  
CD4+ T CELLS

Assistant Commissioner for Patents  
Washington, D.C. 20231

### REQUEST FOR CORRECTED FILING RECEIPT

- Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.  
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#### Error in

- Applicant's name
- Applicant's address
- Title
- Filing Date
- Application Number
- Foreign/PCT Application Re:
- Other Continuing Data

#### Correct data

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

7. This application is a DIV of 09/194,285,  
4/12/99 which claims benefit of  
60/018,175, 5/23/96

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Date: 4/5/01

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Signature

Tami Barnas

(type or print name of person certifying)

(Request for Corrected Filing Receipt [5-8]—page 1 of 2)



3.

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- A.  The correction(s) is/are not due to any error by applicant and no fee is due.

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Emily Holmes  
SIGNATURE OF PRACTITIONER

Reg. No.: 40,652

Emily Holmes

(type or print name of practitioner)

Tel. No.: (858) 784-2937

The Scripps Research Institute

Customer No.:

P.O. Address  
10550 N. Torrey Pines Road, TPC-8  
La Jolla, CA 92037

(Request for Corrected Filing Receipt [5-8]—page 2 of 2)

(Rev. 60-7/99 Pub. 605)

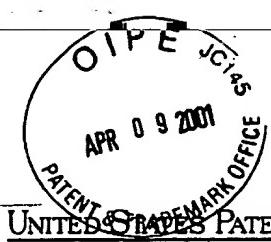
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/715,891	11/17/2000	1644	3302	TSRI 536.1Div2 <i>SCT 02897</i>	6	62	6

The Scripps Research Institute  
10550 North Torrey Pines Road  
Mail Drop TPC-8  
La Jolla, CA 92037

reviewed

*2/27/01 KF*

## FILING RECEIPT



\*OC000000005767957\*

Date Mailed: 02/15/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Susan R. Webb, La Jolla, CA ;  
 Ola Wingvist, Uppsala, SWEDEN;  
 Lars Karlsson, La Jolla, CA ;  
 Michael R. Jackson, Del Mar, CA ;  
 Per A. Peterson, Rancho Santa Fe, CA ;

## Continuing Data as Claimed by Applicant

THIS APPLICATION IS A DIV OF 09/164,285 10/01/1998  
 WHICH CLAIMS BENEFIT OF 60/021,498 07/10/1996

## Foreign Applications

If Required, Foreign Filing License Granted 02/14/2001

## Title

MHC class II antigen-presenting systems and methods for activating CD4+ T cells

## Preliminary Class

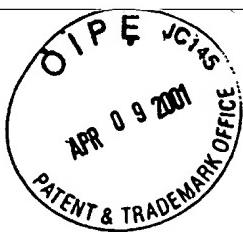
435

Data entry by : ZIMMERMAN, SHAUNA

Team : OIPE

Date: 02/15/2001





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Title 37, Cod of Federal Regulations, 5.11 & 5.15**

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